


<p>Please refer to the instructions for filling this form before completing it. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).</p>		 <h1>Notification of Regulated Waste Activity</h1> <p>United States Environmental Protection Agency</p>		<p>Date Received (For Official Use Only)</p> <p>RECEIVED MAR 25 1993</p> <p>RECEIVED MAR 17 1992</p>	
I. Installation's EPA ID Number (Mark X in the appropriate box)					
<input checked="" type="checkbox"/> A. First Notification		<input type="checkbox"/> B. Subsequent Notification (complete item 9)			
II. Name of Installation (Include company and specific site name)					
CLARK OIL - STATION NO. 347					
III. Location of Installation (Physical address not P.O. Box or Route Number)					
Street					
5301 SOUTH LAGRANGE ROAD					
Street (continued)					
City or Town				State	ZIP Code
LAGRANGE				IL	60525-
County Code		County Name			
		COOK			
IV. Installation Mailing Address (See instructions)					
Street or P.O. Box					
8182 MARYLAND AVENUE					
City or Town				State	ZIP Code
ST LOUIS				MO	63109-
V. Installation Contact (Person to be contacted regarding waste activities at site)					
Name (last)			Name (first)		
HEVIA			NATASHA		
Job Title			Phone Number (area code and number)		
PROJECT COORD.			314-854-1517		
VI. Installation Contact Address (See instructions)					
A. Contact Address Location		B. Street or P.O. Box			
<input checked="" type="checkbox"/>					
City or Town				State	ZIP Code
VII. Ownership (See instructions)					
A. Name of Installation's Legal Owner					
CLARK OIL AND REFINING CORP.					
Street, P.O. Box or Route Number					
8182 MARYLAND AVENUE					
City or Town				State	ZIP Code
ST LOUIS				MO	63109-
Phone Number (area code and number)		B. Land Type	C. Owner Type	D. Change of Owner Indicator (Date Changed) Month Day Year	
314-524-5100		P	P	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

ID - For Official Use Only

VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes. Refer to Instructions.)

A. Hazardous Waste Activity

1. Generator (See Instructions)

a. Greater than 1000 kg/mo. (2,200 lbs.)

b. 100 to 1000 kg/mo. (220 - 2,200 lbs.)

c. Less than 100 kg/mo. (220 lbs.)

2. Transporter (Indicate Mode in boxes 1-5 below)

a. For own waste only

b. For commercial purposes

Mode of Transportation

1. Air

2. Rail

3. Highway

4. Water

5. Other, specify

3. Treater, Storer, Disposer (at installation)

Note: A permit is required for this activity. See Instructions.

4. Hazardous Waste Fuel

a. Generator Marketing to Burner

b. Other Marketer

c. Burner. Indicate device(s)

Type of Combustion Device

1. Utility Boiler

2. Industrial Boiler

3. Industrial Furnace

5. Underground Injection Control

B. Used Oil/Fuel Activities

1. Off-Specification Used Oil Fuel

a. Generator Marketing to Burner

b. Other Marketer

c. Burner. Indicate device(s)

Type of Combustion Device

1. Utility Boiler

2. Industrial Boiler

3. Industrial Furnace

2. Specification Used Oil Fuel Marketer

(or On-site Burner) Who First Claims

the Oil Meets the Specification

IX. Description of Regulated Wastes (Use additional sheets if necessary)

A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24)

1. Ignitable

2. Corrosive

3. Reactive

4. Toxicity

(D001)

(D002)

(D003)

Characteristic

(D000)

(List specific EPA hazardous waste number(s) for the toxicity characteristic contaminant(s))

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D018

B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33. See Instructions. (You need to list more than 12 waste codes.)

1

2

3

4

5

6

C. Other Wastes. (State or other wastes requiring an I.D. number. See Instructions.)

1

2

3

4

5

6

X. Certification

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment. "Authorized Representative of CLARK OIL"

Signature

James A. Skora

Name and Official Title (type or print) ENV.

SERV. COORDINATOR

Date Signed

3/15/93


XI. Comments

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section (II) of the booklet for addresses.)

93.294

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved, OMB No. 2050-0028, Expires 10-31-91
GSA No. 0246-EPA-OT

Please refer to the Instructions for Filing Notification before completing this form. The information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).		 Notification of Regulated Waste Activity United States Environmental Protection Agency		Date Received (For Official Use Only) RECEIVED MAR 17 1993	
I. Installation's EPA ID Number (Mark X in the appropriate box)					
<input checked="" type="checkbox"/> A. First Notification		<input type="checkbox"/> B. Subsequent Notification (completion)		C. Installation's EPA ID Number ILD984915264	
II. Name of Installation (Include company and specific site name)					
CLARK OIL STATION NO. 347					
III. Location of Installation (Physical address, not P.O. Box or Route Number)					
Street 5301 SOUTH LAGRANGE ROAD					
Street (continued)					
City or Town LAGRANGE					
State IL		ZIP Code 60525-			
County Code 031					
County Name COOK					
IV. Installation Mailing Address (See Instructions)					
Street or P.O. Box 8182 MARYLAND AVENUE					
City or Town ST LOUIS					
State MO		ZIP Code 63109-			
V. Installation Contact (Person to be contacted regarding waste activities at site)					
Name (last) HEVIA			(first) NATASHA		
Job Title PROJECT COORD.			Phone Number (area code and number) 314-854-1517		
VI. Installation Contact Address (See Instructions)					
A. Contact Address Location <input type="checkbox"/>		B. Street or P.O. Box <input checked="" type="checkbox"/>			
City or Town ST LOUIS					
State MO		ZIP Code 63109-			
VII. Ownership (See Instructions)					
A. Name of Installation's Legal Owner CLARK OIL AND REFINING CORP.					
Street, P.O. Box, or Route Number 8182 MARYLAND AVENUE					
City or Town ST LOUIS					
State MO		ZIP Code 63109-			
Phone Number (area code and number) 314-524-5100			B. Land Type P		
C. Owner Type P			D. Change of Owner Indicator Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
(Date Changed) Month: Day: Year:					

APR 07 1993

- 2 -



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5

77 WEST JACKSON BOULEVARD
CHICAGO, IL 60604-3590

4/7/93

Dear Notifier:

REPLY TO THE ATTENTION OF:

Enclosed you will find the United States Environmental Protection Agency (U.S. EPA) Identification (ID) number that has been assigned to your installation. You will find your twelve character ID number on the top portion of the enclosed notification form. This ID number acknowledges that you have filed a Notification of Regulated Waste Activity for the installation referenced on the notification form to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). This ID number must be included on all shipping manifest(s) for transporting hazardous wastes; on all correspondence; and on all reports required under Subtitle C of RCRA by the U.S. EPA and State agencies.

Please carefully review your status to determine whether the box you have checked is correct for your installation. If you checked Box 1A "Generator" you are a large generator producing over 1000 kg/mo (2200 lbs). Large generators are subject to all applicable regulations under Subtitle C of RCRA including the Annual/Biennial Report. If you determine Box 1A was checked in error, you can change your status to either a Small Quantity Generator (100-1000 kg/mo) or a Conditionally Exempt Generator (less than 100 kg/mo) by notifying the U.S. EPA in writing at the address at the top of this letter. Please indicate which generator category is correct for your installation.

Please note the U.S. EPA number is site-specific. If your installation changes locations, a new notification is required for a new ID number. If your installation has changed ownership, a subsequent notification must be filed to allow the new owner to use the ID number.

If the purpose of your notification is a one-time disposal for a clean-up, PCB removal, underground storage tank removal, etc., please notify U.S. EPA in writing upon completion of the project. U.S. EPA will deactivate the ID number at that time. Any other notification changes not mentioned can be sent to U.S. EPA by letter.

If you have any further questions regarding hazardous waste activity, please contact the Region V Notification Hotline at (312) 886-4001.

Sincerely,

A handwritten signature in cursive script that reads "Sharon J. Kiddon".

Sharon J. Kiddon
Environmental Protection Specialist